		PENSE CLAIN	7				nd Privac							200
STD 262 (REV 10/92) Stateme						nt on Reverse Side					Page	1	of	1
Rachel Arrezola						DEL ANTIMEN								
POSITION CB/ID NUMBER						Govern DIVISION OR BUREAU					or's Offic			
Chief Deputy Press Secretary						Press Office						INDEX NUME	SER	
RESIDENCE ADDRESS							HEADQUARTERS ADDRESS					TELEPHONE	NUMBER	
							State Capitol				1			
CITY		STATE		ZIP		CITY	арпот			STATE			ZIP	
į.						Sacram	ento			CA			95814	
					MEALS			т		RANSPORTATION			75014	
10-Feb LOCATION						1			CARFARE,			BUSINESS	TOTAL	
		WHERE EXPENSES	LODGING				INCIDENTALS	COST OF		TOLLS,	PRIVATE CAR USE		EXPENSE	EXPENSE
DATE	TIME	WERE INCURRED		BREAKFAST	LUNCH	DINNER		TRANS.	TYPE USED		MILES	AMOUNT		FOR DAY
5 E de	5.00.484	Can Diago		1,00				/		12 29	-			1000
5-Feb	3.00 AM	San Diego		6.00			-	328.68		78.29	22	9.79		422
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	CLAIM	TOTAL								4/11	0.7	6	\$42	2.76
PURPOS	E OF TRI	P, REMARKS AND	DETAILS	(Attach re	ceipts wi	nen requir	ed)				NORMAL W	ORK HOU	-	
Staff GS	s public e	vent in San Diego	on his J	obs Intiti	ative		•					· Ortic HOO	11.0	
											PRIVATE VEHICLE LICENSE NUMBER			
		- September 1997									I MIVATE V	EUIOTE TIC	PENSE NO	MREK
										1	MILEAGE RATE CLAIMED			
										ŀ	0 445 AGENCY ACCOUNTING OFFICE			
	COT.	. Ibe at			VI. (00.10 11.00 1		to a constant				AGENC			FFICE
		t the above is a true state										USE O	NLY	
		wned vehicle was used ar								dr.al., ot	PAID BY F	REVOLVING FU	ND CHECK N	UMBER
realer than	the ret	ed, and that I have met the	ne requiremen	nts as prescrib	ed by SAM	Sections 075	50, 0751 0752	0753 and 0	75/		,	MI	129	7
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